



HOME-BASED LEARNING SOCIETY OF ALBERTA 2018-2019

Associate Membership Form

Please send **\$1.00** membership fee (please make cheque payable to 'Home-Based Learning Society of Alberta') and this completed form to HLSA, 254-52514 RR 223, Sherwood Park, AB, T8A 4R2. Once your membership is processed you will receive a membership card and receipt in the mail, and access to all membership benefits. Thank you.

Number of years of family membership with HLSA _____

Are you over the age of 18? _____

If your family has been a member of HLSA for over 5 years and you are over eighteen you may qualify to receive an Associate membership. Associate members will receive all the benefits of a general member other than voting privileges. Associate members may acquire voting privileges, should they wish to, upon payment of the full general membership fee

Name _____

Address _____ Postal Code _____

Phone Number _____ E-mail * _____

*The e-mail you provide will be used for the organization to keep you up to date with events, votes, and important HLSA information.

****Important: In order for you to be sent an invitation to the HLSA Facebook group (members only), you must provide the e-mail that logs you into your Facebook account. Please provide here if different than the e-mail given above: _____**